Foster Family Home - Corrective Action Report

Provider ID:

1-587793

Home Name:

Rebecca Dulatre, CNA

Review ID:

1-587793-11

86-401 Kawili Street

Reviewer:

Jackie Chamberlain

Waianae

HI 96792

Begin Date:

9/14/2020

Foster Family Home

Required Certificate

[11-800-6]

6.(d)(1)

Comply with all applicable requirements in this chapter; and

Comment:

6(d)(1) Home inspection made for a 3 bed CCFFH recertification. Home met all compliance requirements at the time of the home inspection. No corrective action required

Compliance Manager

Primary Care Giver

9/14/20

Date

Date

Page 1 of 1